before a chemical can initiate the carcinogenic process in such tissues.

This might well be an important factor in the very high incidence of liver cancer in many countries in Asia and Africa. Although a close association with exposure to hepatitis B virus is now widely appreciated, there is good evidence that liver cell damage may be quite important. Thus, cellular injury induced by any agent or associated with other diseases such as liver cirrhosis, chronic pancreatitis or chronic cystitis might well play important roles in facilitating the initiation of cancer development in the organs or tissues in which normal cell proliferation is minimal or absent.

This shows the type of interplay between known factors that probably plays a role in determining the susceptibility of persons to the carcinogenic consequences of exposure to chemical carcinogens. A similar delineation of important modulating factors might become possible for later steps in the carcinogenic process, such as those associated with promotion and progression. As physicians, the challenge lies in identifying those specific factors that modulate against initiation or subsequent steps in the development of cancer. Their study could well have a major influence in devising a rational and acceptable way to prevent some forms of cancer.

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The Social Transformation of American Medicine

The Social Transformation of American Medicine,¹ a book written by Paul Starr, an Associate Professor of Sociology at Harvard University, should be read and reflected upon by any physician who is in a position

of leadership in our profession in these unsettled days, and by any physician who wishes to know more about how we as a profession have got to where we are. The work is superbly documented and it rings true to one who has been more than casually concerned with developments in medicine and health care over the last quarter century. It is not hostile to medicine. It gives organized medicine its due, but suggests that forces beyond the control of medicine or anyone else have done the most to shape what Starr calls a "sovereign profession" and are now bringing about its "social transformation" into something that yet remains to be seen.

He notes that as medical care has become something worth having and as it has become more costly—it has become "everybody's business" as is evidenced by three "revelations" of the 1970s. The first was a discovery of a "health care crisis" by the liberals which was to open the way for governmental reform of what was touted to be a "new system" of health care. As costs continued to rise, there was a second "revelation": Health care was found hardly to improve health at all and in fact might even be harmful to it. This made the first revelation seem less important and diverted attention to cost control. And the third "revelation," this time espoused by conservatives, revealed that the problems of health care in America could be solved by relying on competition and incentives, if the government's role were reduced to a minimum. At present Starr believes that no group is dominant and that there is no evidence that one approach is better than another. He does suggest that doctors continue to hold a strategic position through their established relationships with patients and hospitals, as they enter the emerging world of zero-sum medical practice and as the new medical corporations hove upon the scene.

While this book offers no clear vision of what the future will be, it does provide insight into the forces that have brought us to our present situation and which may help to shape the further evolution, and likely the transformation, of medical practice and patient care in this nation. It should be required reading for those most concerned with and about these problems.

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